



WISCONSIN

DEPARTMENT OF WORKFORCE DEVELOPMENT
Division of Economic Support
Bureau of Welfare Initiatives

**TO: Economic Support Supervisors
Economic Support Lead Workers
Training Staff
FSET Administrative & Provider Agencies
Child Care Coordinators
W-2 Agencies**

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BWSP OPERATIONS MEMO

No.: 00-87

**File: 1250.14
2720**

Date: 11/30/00

Non W-2 ☒ W-2 ☐ CC ☐

PRIORITY: URGENT

SUBJECT: ANNUAL COLA-RELATED CHANGES

CROSS REFERENCE: Medical Assistance Handbook
BWSP Operations Memos 00-88 & 00-89

EFFECTIVE DATE: 01/01/01

BACKGROUND

The cost-of-living adjustments (COLA), 3.5%, in the Social Security Administration's Old Age, Survivors and Disability Insurance (OASDI, or Title II) and federal portion of Supplemental Security Income (SSI) benefits effective 01-01-01 result in the following changes in the Medical Assistance income and asset levels, allowances and deductions.

There is no change in the level of the State Supplemental Payment to SSI recipients.

Eligibility redeterminations will be included in the CARES mass change done the weekend of 12/02/00.

The MA changes are included in the MA Handbook's January, 2001 release.

CARESMass Change

Data updates are made based upon information received from the Social Security Administration (SSA) related to COLA increase to social security (i.e., disability, survivor, retirement) benefits and Supplemental Security Income (SSI) program benefits. The Medicare Part B premium amount is also updated based upon the yearly amount described in federal law. The benefit increase based upon the COLA will be 3.5% of the current benefit.

Updates of CARES Fields:

CARES Screen

1. SSI Benefit	AFUI
2. Social Security Benefit	AFUI
3. 503 COLA Disregard	AFUI
4. QMB/SLMB COLA Disregard	AFUI
5. Medicare Part-B Premium amount.	AFMD

For each person in a W-2, Child Care, MA, BadgerCare, Family Care Assistance Group (AG), or FS AG that is open or has been closed less than 30 days, CARES will update the SSA/SSI benefit amount on AFUI (the unearned income screen) with an effective date of 01/01 (January/2001). We are using data supplied to us by the SSA to identify SSA/SSI recipients and new benefit amounts.

EXCEPTIONS THAT ARE **NOT** UPDATED AUTOMATICALLY:

1. When the federal COLA file has SSI Income, but there is no corresponding AFUI record on CARES, CARES will not be updated. The error message will be "SDX shows SSI eligible". (If the correct AFUI is on CARES, but with an amount of zero, the same message will appear on the information report and the case will be updated)
2. When there is information in the SSA COLA file and CARES has SSA and/or SSI income that is dated in the future (01/01 or later), CARES will not be updated and ED/BC will not be run. The information will be sent to the exception report. The error message is "Future Begin Date – No Update".
3. When the AFUI screen on CARES shows current information for either SSI or SSA and there is no information on the federal COLA file, one of the following messages will appear:
 - a. "No COLA Record for SSA".
 - b. "No COLA Record for SSI".
4. Cases that have multiple types of SSA income in CARES will have the information sent to the exception report, regardless of the COLA information. The error message is "Multiple SS records on CARES".
5. Cases that are overridden by ESS will not be updated and the information will be sent to an exception report. The error message is "Manual Override".

EXCEPTIONS THAT ARE UPDATED AUTOMATICALLY:

1. CARES have SSA greater than zero and SSA COLA has \$0. Mass change will update CARES, run ED/BC and send the information to the exception reports. The message is "COLA shows no SSA"
2. CARES have SSI greater than zero and SSA COLA has \$0. Mass change will update CARES, run ED/BC and send the information to the exception reports. The message is "COLA shows no SSI"
3. CARES does not show that the individual is entitled Medicare part B, but the federal COLA file does. The message is " Person is Part B Entitled".
4. CARES shows that the individual is entitled Medicare part B, but the federal COLA file does not. The message is " Person is not Part B Entitled".
5. The Medicare part B premium payor on CARES was different then the part B premium payor on the Federal COLA file.

CARES Tables

Reference table updates are made to 4 tables that are used in determining Medical Assistance eligibility. These changes are required because of changes in the SSI payment level upon which the Medicaid income limits are based or because of a change in the Consumer Price Index (CPI). Reference table changes were done so that they were in place the day after adverse action. An effective date of Jan/01/2001 will be used for TMEP, TASP, and TSCA. TCDP changes have already been done through 2005. TCDP should use the date the table change is made as the table effective date.

Changes to TMST will not be needed this year because the AFDC related and the SSI related Medically needy limits are capped at \$591.67 for group size 1 and 2.

1. Changes in SSI related income and Shelter Limits are in table **TMEP**.
2. Changes in Community Waiver income limits and personal maintenance allowances as well as the Medicare Part B premium amount and the Spousal Impoverishment Maximum income allocation amount are **also** found in **TMEP**.
3. The Spousal Impoverishment asset limit is in **TASP**.
4. The Dates controlling the time between the COLA mass change and the Federal Poverty Level mass change are stored in **TCDP**.
5. Changes in the SSA COLA percentage are found in **TSCA**.

EOS REPORTS

There will be 7 reports generated as a result of this mass change.

EOS Report ID	CARES Report ID	Report Title
C308	MC200A-CMC	COLA MC EXCEPTION LISTING BY AG
A list of Cases that for specific reasons were not updated or run through EDBC to Recalculate their eligibility. This report lists the 'Exceptions'		
C309	MC202A-CMC	COLA MC – INFO/UPDATE BY AG
A list of exception cases that were updated, but that should be reviewed by the ES worker.		
C310	MC250A-CMC	COLA MC – ALL INDIVS UPDATED
A list of all cases that were updated on AFUI or AFMD. These cases have also been run through eligibility.		
C303	MC182A-RTM	AGS AFFECTED BY REF TABLE MC
This is a list of cases with an assistance group that increased or decreased as a result of the mass change. If one Assistance group in the case changed all assistance groups are listed.		
C304	MC182B-RTM	COUNTY SUMMARY – MC REF TABLE
This report shows the number of AG s that opened, closed, increased and decreased by county. It also shows dollar amounts when applicable.		
C305	MC182C-RTM	STATE SUMMARY – MC REF TABLE
This report shows the number of AG s that opened, closed, increased and decreased by the entire state. It also shows dollar amounts when applicable.		
C307	MC192A-RTM	EXCEPTION LIST/AGS - REF TAB MC
This report can be produced by any Mass Change. It shows Assistance Groups that should be looked at for various reasons.		

SSI-RELATED INCOME & ASSET CHANGES

Cross Reference: MAH, Appendix 25.9.3; Appendix 30.5.0.

Effective Date: 01-01-01.

CARES: These changes are part of the 12/02/00 CARES mass change.

ITEM	NEW AMOUNT	OLD AMOUNT
Categorically Needy Income		
Size 1	\$ 437.11 + Actual Shelter up to \$ 176.67	\$ 425.11 + Actual Shelter up to \$ 170.67
Size 2	\$ 662.72 + Actual Shelter up to \$ 265.33	\$ 644.72 + Actual Shelter up to \$ 256.33
Medically Needy Income		
Size 1	No Change	\$ 591.67
Size 2	No Change	\$ 591.67
Categorically Needy Assets		
Size 1	No Change	\$ 2,000.00
Size 2	No Change	\$ 3,000.00
Medically Needy Assets		
Size 1	No Change	\$ 2,000.00
Size 2	No Change	\$ 3,000.00

CATEGORICALLY NEEDY INSTITUTIONAL RESIDENT INCOME LIMIT

Cross Reference: MAH, Institutions Unit, Step #11.

Effective Date: 01-01-01

CARES: This change is part of the 12/02/00 CARES mass change.

ITEM	NEW AMOUNT	OLD AMOUNT
Categorically needy income limit for person in a medical institution.	\$ 1,590.00	\$ 1,536.00

SPOUSAL IMPOVERISHMENT INCOME ALLOCATION & ASSET SHARE

Cross Reference: MAH, Appendix 23.4.2 & 23.6.0.

Effective Date: 01-01-01

CARES: This change is part of the 12/02/00 CARES mass change.

ITEM	NEW AMOUNT	OLD AMOUNT
Community Spouse Asset Share (CSAS) maximum	\$ 87,000.00	\$ 84,120.00
Income allocation	\$ 2,175.00	\$ 2,103.00

SPOUSAL IMPOVERISHMENT ASSET TABLE EFFECTIVE 01/01/01

<u>IF</u> the total countable assets of the couple are:	<u>THEN</u> the CSAS* is:	MA Eligibility Limit
\$174,000 or more	\$87,000	\$89,000
Less than \$174,000 but greater than \$100,000	½ of the total countable assets of the couple	½ + \$2,000
\$100,000 or less	\$50,000	\$52,000

*CSAS is the "Community Spouse Asset Share".

Spousal Impoverishment Income Allocation & Allowance Table Effective 01/01/01

NOTE: All dollar amounts are monthly amounts

Community Spouse Allocation	<p>The maximum allocation is the <u>lesser</u> of: \$2,175.00, or \$1,875.00 plus excess shelter allowance.</p> <p>"Excess shelter allowance" means shelter expenses above \$562.50. Shelter expenses are mortgage, rent, taxes, maintenance fees, and a utility allowance.</p> <p>Subtract \$562.50 from the community spouse's shelter costs. If there is a remainder, add the remainder to \$1,875.00.</p>
Dependent Family Member Allocation	\$468.75 per dependent family member living with the community spouse. (This amount does not change with the COLA increases but rather with the Federal Poverty Level changes that occur in the spring of each year.)
Personal Needs Allowance	\$45 for institutionalized non-veterans.
Community Waivers Allowance	\$710 to \$1080 for a person in community waivers

MEDICARE PART B PREMIUM

Cross Reference: None.

Effective Date: 01/01/01.

CARES: This change is part of the 12/02/00 CARES mass change.

ITEM	NEW AMOUNT	OLD AMOUNT
Base Monthly Premium Amount	\$ 50.00	\$ 45.50

The actual amount paid by the person is listed on the BENDEX tape.

For each individual where the Medicare Part B Premium Amount or the Medicare Part B Premium Payor is updated, the HIC number on AFMD will also be updated if the COLA file is different than the CARES information. The HIC number will not be updated if CARES has railroad retirement or black lung fund indicated.

SSI-E PAYMENT LEVEL

Cross Reference: MAH, Appendix 19.1.1 & 19.2.2..

Effective Date: No change.

CARES: Not applicable.

ITEM	NEW AMOUNT	OLD AMOUNT
State SSI-E Supplement	Same	\$ 95.99

COMMUNITY WAIVERS BASIC NEEDS ALLOWANCE

Cross Reference: MAH, Appendix 25.9.2.1.

Effective Date: 01-01-01

CARES: This change is part of the 12/02/00 CARES mass change.

ITEM	NEW AMOUNT	OLD AMOUNT
Basic Needs Allowance	\$ 710.00	\$ 692.00
Maximum "Personal Maintenance Allowance"	\$ 1,080.00	\$ 1,054.00

COMMUNITY WAIVERS SPECIAL INCOME LIMIT (GROUP B)

Cross Reference: MAH, Appendix 25.9.2.

Effective Date: 01-01-01.

CARES: This change is part of the 12/02/00 CARES mass change.

ITEM	NEW AMOUNT	OLD AMOUNT
Single person or spouse not applying.	\$ 1,590.00	\$ 1,536.00
Married couple, both applying.	\$ 3,180.00	\$ 3,072.00

AFDC-RELATED INCOME & ASSET CHANGES

Cross Reference: MAH, Appendix 30.4.0.

Effective Date: Not applicable.

CARES: Not applicable.

ITEM	NEW AMOUNT	OLD AMOUNT
Income:		
1. Categorically needy.	No Change	See <u>MA Hbk.</u>
2. Medically needy.	No Change	Size 1 = \$ 591.67
Assets:		
1. Categorically needy.	No Change	See <u>MA Hbk.</u>
2. Medically needy.	No Change	See <u>MA Hbk.</u>

SPOUSAL IMPOVERISHMENT BROCHURE

Workers can access the Spousal Impoverishment Asset and Income Allocation Tables on the Internet by going to:

<http://www.dhfs.state.wi.us/medicaid/recpubs/spouse_impov.htm>

Click on the link to the tables.

You will not see these changes on the web site until January, 2001. When the changes are made, please print them out for anyone who requests a copy and doesn't have Internet access.

CONTACT

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Note: Email contacts are preferred. Thank you.